



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SH	203048	DATE OF INSPECTION	1/2/13
LOCATION OF INSTRUMENT (STREET AND CITY)		TIME OF INSPECTION	
112 E. LACLEDE MALDEN MO 63863		1153	

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

DIAGNOSTIC CHECK (PRINTOUT ATTACHED)

<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 50 °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER

INDICATOR LIGHTS

TIME AND DATE

SIMULATOR TEMPERATURE (34 °C ± 0.2 °C) 34 °C

CALIBRATION CHECK -
Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE
(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1	.100	TEST 2	.100	TEST 3	.100
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PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

REFUSALS	0	(0-.04)	2	(.05-.09)	1	(.10-.14)	0	(.15-.19)	2	(Over .19)	1
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

**THE INSTRUMENT IS OPERATING WITHIN THE DEPARTMENT OF HEALTH GUIDELINES
NO REPAIRS HAVE BEEN PERFORMED**

Solution Manu.: 03-07-12 Solution Lot #: 12040 Solution Exp.: 03-07-14 Solution Conc.: .100

INSPECTING OFFICER	
SIGNATURE <i>[Signature]</i>	PRINT NAME Cpl. D. Dixon
TYPE # PERMIT NUMBER/EXPIRATION DATE 220104 / 05-09-14	TELEPHONE NUMBER (573) 276-2211

**GUTH LABORATORIES, INC.**

580 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-6470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 12040 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 9, 2012, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1211% (w/vol) ethyl alcohol. The expiration date for this lot number is March 7, 2014 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
MALDEN POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 203048
01/02/13

TESTING OFFICER:
DIXON/BARREN
OFFICER I.D.: 111
PERMIT NUMBER: 200104
EXPIRATION DATE: 05/09/14
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	11:53
INTERNAL STANDARD	VERIFIED	11:53
EXTERNAL STANDARD	.100	11:53
BLANK TEST	.000	11:54
EXTERNAL STANDARD	.100	11:54
BLANK TEST	.000	11:55
EXTERNAL STANDARD	.100	11:55
BLANK TEST	.000	11:56

N = 3
SIN. = .1
AVG. = .1

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
MALDEN POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 203048
01/02/13
11:50

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS

SAMPLE CHAMBER: 50c

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;{<=>?@ABCDEFGHI
HIJKLMNOPQRSTUVWXYZ[\]^_`abcde fghijklmno
pqrstuvwxyz{|}~"

Operator Signature



Operator Signature



**BAC DataMaster
Evidence Ticket**

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
MALDEN POLICE DEPARTMENT

STATE OF MISSOURI
MALDEN POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 203048
01/02/13

BAC DATAMASTER SERIAL NUMBER 203048
01/02/13

ARREST TIME: 11:30
SUBJECT NAME:
TEST/SAMPLE
DOB: 01/01/50 SEX: M
STATE/D.L.: MO/T000000001
ARRESTING OFFICER:
DIXON/DARREN
OFFICER I.D.: 111
TESTING OFFICER:
DIXON/DARREN
OFFICER I.D.: 111
PERMIT NUMBER: 220104
EXPIRATION DATE: 05/09/14
MISCELLANEOUS DATA:

ARREST TIME: 11:30
SUBJECT NAME:
TEST/SAMPLE
DOB: 01/01/50 SEX: M
STATE/D.L.: MO/T000000001
ARRESTING OFFICER:
DIXON/DARREN
OFFICER I.D.: 111
TESTING OFFICER:
DIXON/DARREN
OFFICER I.D.: 111
PERMIT NUMBER: 220104
EXPIRATION DATE: 05/09/14
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

--- BREATH ANALYSIS ---

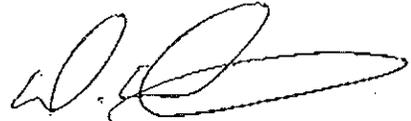
BLANK TEST	.000	12:01
INTERNAL STANDARD	VERIFIED	12:01
SUBJECT SAMPLE	.000	12:01
BLANK TEST	.000	12:02

RADIO INTERFERENCE

Operator Signature



Operator Signature





State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



DARREN D DIXON

Is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 05/09/2012

Number 220104

Expires 05/09/2014

MO 680-0771 (7-88)

Director of State Public Health Laboratory

Director, Department of Health

Lsb. 4 (R7-88)